

ESD Safety Committee Meeting Minutes

January 14, 2009

Attending: Don DePaolo, Ernie Majer, Kim Abbott, Vivi Fissekidou, Barry Freifeld, H.H. Liu, Cristina Castanha, Maryann Villavert, Nic Spycher, Bill Collins, Vivi Fissekidou

1. Self Assessment validation report

The OCA Self Assessment validation report was submitted to Don on 1/13/09 and forwarded to the ESD Council and safety committee. It was noted that ESD has a well-established self-assessment process that involves multiple levels of management inspecting workspaces.

Divisional Findings

- Some items that require CATS entry are entered into the Work Request Center database in lieu of CATS.
- Some LLPI's walkthroughs were not documented upon completion. The ESD ISM Rev.8, requires that the record will be collected by the safety coordinator at the end of the fiscal year to be included in the annual self assessment documentation.
- One waste item was stored in excess of the ESD has 6 month limit on waste storage in an SAA.
- First Aid SAAR corrective actions were not entered into CATS. The First Aid SAAR corrective actions will be evaluated, discussed with line management and entered into CATS as appropriate.

Institutional Findings

- The Division ISM Plan does not include a listing of Work Leads, as required in PUB- 3000 section 1.3.2.5. The wording in PUB-3000 should be clarified.

Discussion:

- The Divisional findings and Noteworthy practices were distributed on paper and quickly discussed.

Actions:

- Enter ESD Findings into CATS,
- Use CATS to tract all items including items that can be resolved with a work request.
- Present report in a Town Hall meeting

2. Rad waste training issue

"Waste Generator Training" deficiency memo was issued by Waste Management indicating that an ESD staff member requisitioned rad waste without the appropriate training. The employee's profile did not indicate any overdue training and the RWA did not list EHS0622 as a required course to take; note that the RWA has a paragraph on "Waste" but no specific training is listed.

Vivi contacted John Seabury since this training was not identified as required even though the employee listed rad work in his JHA. He responded that this issue has been identified as an institutional oversight that has been corrected but is not reflected in people's JHA unless they retake it.

Actions: Employee enrolled in the 1/28/09 class and he will complete the required training before he requests any waste pick up. - CATS 6599

3. First-aid incident on 12/17/09

RA hit her head at the shelf trying to retrieve a vial. Supervisor and employee away the lab; supervisor's supervisor responded to SAAR, Rob visited the lab to evaluate set up. Main issue- respond within 7 calendar days

Discussion: ESD makes a serious effort to meet the 7calendar days response time. This is an issue for other divisions and a CATS issue is in the system addressing this condition.

4. New ESD personnel orientation

Scheduled for 3rd Wednesday of the month and notified supervisors. First meeting on 12/17/08, next on 1/21/09

5. Hydrogeology dept. walkthrough Scheduled for 1/15/09 Labs; 1/16/09 offices Bldg 90

6. Near miss database- Maryann

<http://esd.lbl.gov/resources/health&safety/nearmissprogram.html>

Discussion: Maryann presented the new database to be modeled after the Engineering division one; suggested that "key word" field should be added to facilitate search. Notify the staff of

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database.

7. HSS audit prep. -Ernie/Maryann/Seiji/Vivi

Brian Fujikawa formally logged his observations in HSS database:

- Mack Kennedy keeps detailed scientific notebook- noteworthy practice
- John Christensen- not good familiarity with JHA, no documented OJT
- Carl Steefel- no written procedure for nano-cleanup- corrected by referencing the nano-training.

Additional standdown on 11/14/09

- Bldg. 64: Are steel toe shoes required for everyone working there, the door placard lists foot injury as a hazard.

Discussion: Barry commented that steel toe shoes should be required because of hazards, door signs indicate foot injury. Ernie stated that this is specific to the activity and should not be required by everyone entering BLDG 64; Kim suggested that the foot injury hazard be added to the group JHA and the steel toe will be the control when the task is performed.

- Ben Gilbert: People working in the lab were uncertain about where to located written procedures; wash hands before leaving the lab or eating.

Vivi: update door signs, barcoding for cylinders, Waste in SAA should to be requisitioned, started on 5/08 & 6/08-more than 6 mo; bag with "pre-waste" needs to be moved into the SAA.

Additional lab standdown scheduled on 1/23/09

Action: Vivi to further discuss with Ben and evaluate if it should be entered into CATS; still within the 9months LBNL waste requisition time; waste management prioritize pickups based on 9mo time.

- Bldg. 51F: (Ernie participated)

How did the employee's supervisor allowed work to continue without the training; training and OJT records specific to the X-Ray authorization, Tim's supervisor was not the user or the PI for that authorization.

Action: Need to educate supervisor to review and be familiar with the employees formal authorizations.

Work bench to the left of entrance not bolted, may slide and block access during an earthquake.

Action: Vivi to evaluate the need bolting the bench to the floor; emailed Mike Wisherop, SME.

Kelly Montgomery, PBD-no report entered in HSS database; she has been impressed with all the ESD labs

- Tetsu: impressed with organization and housekeeping; chemicals labeled alphabetically; Who has access to labs- RWAS require controlled access

Vivi: old revision of ISM in primer; HF exposure kit expired on 12/08; door signs- PPE listed too specific- too update; Rm116 office-not technical area; does not need a door sign with hazards/PPE only office- inside rooms need to have the signs

- Margaret: postponed for next week

Jack Bartley, Operations, no report entered in HSS database- overall ESD attitude excellent.

- Nigel; housekeeping; lead brick; 1Hg thermometer- to be exchanged

Terry, Dept. Head's walked through on 1/7/09- housekeeping improved

2 unsecured file cabinets(OSTI records)

Jim Bishop: safety memo between Torn group and Bishop group for access and use of space/hood/flam storage. Jim does not want to use safety glasses in main lab-exemptions need to be approved by EH&S director.

Vivi: update HMS; 1Hg thermometer- to be exchanged; door sign for office

Action: Rob will research the Hg thermometer exchange requirements.

Safety glass exemptions should be approved by ESD director before presented to the EH&S director,

8. SRC committee- Seiji was participating in cross divisional ISM reviews but he emailed Vivi the following items to be discussed:

- Supervisors' responsibility for reporting workers (work leads) with formal work authorization--- Establish a formal procedure (report to Vivi?); communication to the people affected by the lack of authorization; changes to the ownership of the authorization (allow to assign a back-up person)
- HSS auditors may very well pay visit to any of ESD office and lab space.

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General discussion

- 2 new CATS for the server room, computer on the floor & unsecured equipment above 3ft
- Labs that required standdowns/discussions: Kevin Knauss; Rohit- was away in December; Janet –new PI/lab, Glen –renovated lab
- Maryann-HSS update- audit will focus on (a) JHA and process understating; (b) exposure assessments; (c) workers' rights- all old signs to be removed. Vivi already posted the new signs that include the DOE BSO
- Correcting items on the spot during the audit will not count as findings.
- ALS requested that auditors do not participate on actual work but schedule a dry run with them.
- DOE BSO: HSS update: audit will focus on (a) CMS and waste management, (b) HWHF inventory, and (c) the chemicals in SAAs before they are requisitioned but after they are removed form CMS